

**Electronic Filing System (EFS) Data
Electronic Patent Application Submission
USPTO Use Only**

EFS ID: 11625
Application ID: 09681822
Title of Invention: Vehicle Headliner and Laminate
Therefor
First Named Inventor: Michael Sandoe
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2001-06-11 
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: 71264-6
Digital Certificate Holder: cn=Joel Evan Bair, ou=Registered Attorneys, ou=Patent and
Trademark Office, ou=Department of Commerce, o=U.S.
Government, c=US
Certificate Message Digest: y0DHNVhEsUcktgPpdYo4rA==
Total Fees Authorized: \$1582.0

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Deposit Account Number: 180013
Deposit Account Name: Joel E. Bair

jc474 u s pto
09/681822
06/11/01



TRANSMITTAL FORM

Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: 71264-6

Vehicle Headliner and Laminate Therefor

First Named Inventor: Mr. Michael D. Sandoe

SUBMITTED BY

Name: Mr. Joel E. Bair Esq.

Registration Number: 33356

Electronic Signature Mark: Joel E.
Bair Date Signed: 20010611

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

specification	Spec2.xml
declaration	dec1.tif
declaration	dec2.tif
declaration	dec3.tif
bibd-transmittal	filingsapds.xml

fee-transmittal

filngfee.xml

Attached Image File(s):

dec1.tif

dec2.tif

dec3.tif

096848200 "DEBT TO

Comments:

1998-00000000

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PTO/SB/01 (3-97)

Approved for use through 6/30/08. OMB 0651-0032

Patent and Trademark Office, US DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		Attorney Docket No.	71264-6
		First Named Inventor	Michael D. Sandoe
COMPLETE IF KNOWN			
		Application No.	
		Filing Date	
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (only if one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

VEHICLE HEADLINER AND LAMINATE THEREOF

(Title of the Invention)

the specification of which

- is attached hereto
 or
 was filed on _____, as United States Application Number or PCT International Application Number: _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached YES <input type="checkbox"/> NO <input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code §119(c) of any United States provisional application(s) listed below.

Application Number (S)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/073,077	01/30/98	

Page 1 of 3

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PTO/SB/01 (0-97)

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DECLARATION - Utility Or Design Patent Application

I hereby claim the benefits under Title 35, United States Code §120 of any PCT International application designating the United States of America, listed below and, herafter as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which becomes available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/239,112		01/28/1999	

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 20915

Or
 Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label Here

Name	Registration No.	Name	Registration No.
John E. McGarry	22,160	Joel B. Bair	33,356
H. Lawrence Smith	24,900	Richard D. Grauer	22,388
Ralph T. Rader	28,772	Michael D. Fishman	31,981
Joseph V. Coppola, Sr.	33,373	Mark A. Davis	37,118
Michael B. Stewart	26,018	Kristin L. Murphy	41,212
Alexander D. Rabinovich	37,425	G. Thomas Williams	42,228
Kevin D. Rutherford	40,412	William Czonowski	42,441
Glenn E. Forbis	40,610	Donald J. Wallace	43,977
Ronald P. Kauschka	24,104	John P. Guenther	39,698
Matthew J. Russo	41,282		
Anna M. Shih	36,372		
James F. Kamp	41,882		
David K. Benson	42,314		

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to Customer Number 20915 or Correspondence Address below
or Bar Code Label

Name: Mark A. Davis, Reg. No. 37,118, RADER, FISHMAN, GRAUER & MCGARRY
AN OFFICE OF RADER, FISHMAN & GRAUER PLLC

Address: 171 Monroe Avenue, NW, Suite 600

City, State, Zip: Grand Rapids, Michigan 49503

Country: US Telephone: 616-742-3500 Fax: 616-742-1010

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor A petition has been filed for this unsigned inventor.

Given Name (first and middle [if any]) Family Name or Surname

Michael D. Sandoe

Inventor's Signature: *Michael D. Sandoe* Dated: *July 8, 2001*

Residence: City: Grand Rapids State: MI Country: US Citizenship: US

Post Office Address: 4653 Bluegrass Drive, S.E.

City: Grand Rapids State: MI Zip: 49546 Country: US

Additional inventors are being named on the 1 supplemental additional inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/02A (3-97)

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Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Michael G.		Zimmer				
Inventor's Signature	Michael G. Zimmer					Dated 6-08-01
Residence: City	Belmont	State	MI	Country	US	Citizenship
Post Office Address	1514 Scott Creek Drive, N.E.					
City	Belmont	State	MI	Zip	49306	Country
Name of Inventor	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Dated
Residence: City		State		Country		Citizenship
Post Office Address						
City		State		Zip		Country
Name of Inventor	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Dated
Residence: City		State		Country		Citizenship
Post Office Address						
City		State		Zip		Country
Name of Inventor	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Dated
Residence: City		State		Country		Citizenship
Post Office Address						
City		State		Zip		Country

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FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 1582

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 180013



Deposit Account Name: Rader, Fishman and Grauer PLLC

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

SUBMITTED BY

Authorized Name:

Joel E. Bair

Electronic Signature Mark:

Joel E. Bair

Date Signed:

20010611

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 710

Subtotal For Basic Filing Fee: \$ 710

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 64	103	\$ 18	44	\$ 792
Independent Claims: 4	102	\$ 80	1	\$ 80

Subtotal For Extra Claims Fees: \$ 872